

Application # _____

Filing Date: _____/_____/_____

Formality Review Claims Count Sheet

BEST AVAILABLE COPY

As Filed			As Filed			As Filed			As Filed		
No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.
1			51			101			151		
2	1		52			102			152		
3	1		53			103			153		
4		2	54			104			154		
5		1	55			105			155		
6		1	56			106			156		
7		2	57			107			157		
8		2	58			108			158		
9		2	59			109			159		
10		2	60			110			160		
11		2	61			111			161		
12		1	62			112			162		
13		1	63			113			163		
14	1		64			114			164		
15	1		65			115			165		
16	1		66			116			166		
17		1	67			117			167		
18		1	68			118			168		
19		1	69			119			169		
20		1	70			120			170		
21		1	71			121			171		
22		1	72			122			172		
23		1	73			123			173		
24		1	74			124			174		
25		1	75			125			175		
26		1	76			126			176		
27		1	77			127			177		
28		1	78			128			178		
29		1	79			129			179		
30		1	80			130			180		
31		1	81			131			181		
32		1	82			132			182		
33		1	83			133			183		
34		1	84			134			184		
35		1	85			135			185		
36		1	86			136			186		
37		1	87			137			187		
38		1	88			138			188		
39		1	89			139			189		
40		1	90			140			190		
41		1	91			141			191		
42		1	92			142			192		
43	1		93			143			193		
44	1		94			144			194		
45			95			145			195		
46			96			146			196		
47			97			147			197		
48			98			148			198		
49			99			149			199		
50			100			150			200		
T. Ind.	7		T. Ind.			T. Ind.			T. Ind.		
T. Dep.	40		T. Dep.			T. Dep.			T. Dep.		
Total	47		Total			Total			Total		